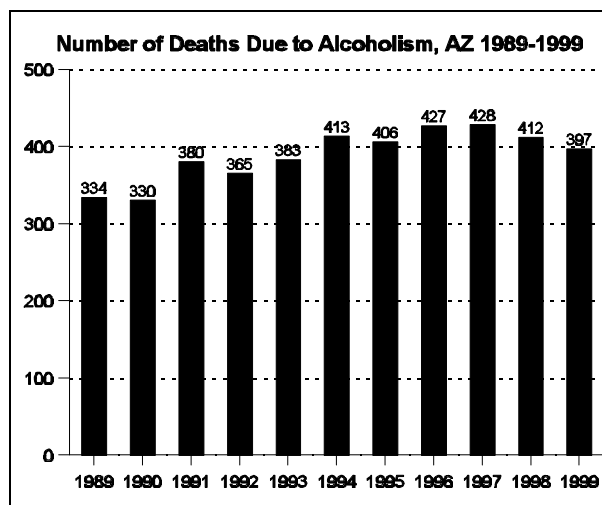


Substance Abuse

The problem of substance abuse and dependence has long troubled the Nation, requiring balance among concerns for public safety, moral values, and health. Advances in science have reshaped our understanding of addiction and created an array of effective behavioral and pharmacological interventions. Unfortunately, between 13 million and 16 million people need treatment for alcoholism and/or drugs in any given year, but only 3 million actually receive care (SAMHSA, 1999).

In Arizona, substance abuse treatment offers an opportunity for thousands to reclaim their lives and rebuild families and careers shattered by alcoholism and drug dependency. Over the past 20 years, a body of evidence has established the potential of treatment to produce positive change and to dramatically reduce the social and healthcare costs of addictive disorders. In particular, substance abuse treatment reduces street crime, restores gainful employment, reduces risk-taking lifestyles, and relieves a host of public health costs associated with HIV disease, fetal substance exposure, debilitating disease, and substance-related mental health problems, such as domestic violence, suicide and chronic depression.

In addition to treatment, research has demonstrated that sound prevention efforts and programs can reduce the incidence and onset of substance abuse and related problems, thereby preventing the need for treatment and social services. By addressing conditions that directly affect individuals, families, and communities, prevention programs and strategies work to foster the health of Arizona residents.



Objective #1 Reduce mortality related to alcohol use.

- Strategy 1.1 Continue ADHS involvement in collaborative planning, funding, and system coordination through Governors Strategic Plan for Substance Abuse and the Governors Drug and Gang Policy Council.
- Strategy 1.2 Reduce entry barriers to improve rapid access to treatment and targeted outreach to vulnerable AOD (Alcohol & other drugs) populations (disabled, ethnic minorities, HIV infected individuals, women w/ children).
- Strategy 1.3 Continue ADHS involvement in Substance Abuse Consortia to improve and promote evidence - based AOD treatment and effective treatment systems.

Objective #2 Reduce mortality related to drug abuse.

- Strategy 2.1 Continue ADHS involvement in collaborative planning, funding, and system coordination through Governors Strategic Plan for Substance Abuse and the Governors Drug and Gang Policy Council.
- Strategy 2.2 Reduce entry barriers to improve rapid access to treatment and targeted outreach to vulnerable AOD (Alcohol & other drugs) populations (disabled, ethnic minorities, HIV infected individuals, women w/ children).
- Strategy 2.3 Continue ADHS involvement in Substance Abuse Consortia to improve and promote evidence - based AOD treatment and effective treatment systems.

Objective # 3 Increase the percentage of Junior High / Middle school students who abstain from substance use.

- Strategy 3.1 Engage communities, community members, stakeholders, and interested parties on youth-related substance abuse issues.
- Strategy 3.2 Support an enhanced resource base for behavioral health prevention programs.
- Strategy 3.3 Secure adequate funds to support continued ADHS Needs Assessment so resources and programs can be matched to geographic areas and populations based on need.

Strategy 3.4 Promote the use of comprehensive research-based strategies which address multiple life domains. Advocate for social policies which support healthy children, families, and communities.

Objective #4 Reduce the percentage of alcohol related traffic fatalities.

Strategy 4.1 Launch a public / private initiative in partnership with Mothers Against Drunk Drivers (MADD), and Arizona Department of Health Services (ADHS) / Emergency Medical Services (EMS) to improve public awareness and identification of impaired drivers. The initiative will include local police departments in 5 metropolitan areas statewide. The target populations will be: 1) Underage drinkers, 2) Chronic re-offenders, 3) Impaired Drivers.

Strategy 4.2 Support the reduction of Blood Alcohol Concentration (BAC) legal limits to .08 in Arizona.